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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/567,690	
	Filing Date	February 9, 2006	
	First Named Inventor	Toshiaki SHIMADA	
	Group Art Unit	Not Yet Assigned	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission		Attorney Docket Number	740819-1134

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): A copy of the European Search Report and seven References listed.
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Donald R. Studebaker, Registration No, 32,815 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	January 30, 2008



Docket No: 740819-1134
Serial Application No.: 10/567,690

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)
Toshiaki SHIMADA)
Application No.: 10/567,690) Art Unit: Unknown
Filed: February 9, 2006) Confirmation No. Unknown
For: ELECTRIC CYLINDER)

INFORMATION DISCLOSURE STATEMENT

United States Patent and Trademark Office
Customer Service Window
Randolph Building
401 Dulany Street
Alexandria, VA 22314

Sir:

In accordance with the duty of disclosure as set forth in 37 C.F.R. §1.56, the accompanying information is being submitted in accordance with 37 C.F.R. §§1.97 and 1.98.

Pursuant to 37 C.F.R. §1.98, a copy of each of the documents cited is enclosed. However, copies of the listed U.S. patents and U.S. patent application publications are not enclosed since it is no longer required according to the July 11, 2003 waiver of the requirement for copies of cited U.S. patents and U.S. patent application publications in national patent applications filed after June 30, 2003 and international applications entering the national stage under 35 U.S.C. §371 after June 30, 2003.

I, the undersigned, hereby state that each item of information contained in this Information Disclosure Statement was first cited in a communication from a foreign patent office in a counterpart foreign application not more than three (3) months prior to the filing of this Information Disclosure Statement.


It is requested that the accompanying PTO-1449 be considered and made of record in the above-identified application. To assist the Examiner, the documents are listed on the attached form PTO-1449. It is respectfully requested that an Examiner initialed copy of this form be returned to the undersigned.



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The Commissioner is hereby authorized to charge any fees in connection with this filing which may be required, or credit any overpayment to Deposit Account No. 19-2380.

Respectfully submitted,

By: 
Donald R. Studebaker
Registration No. 32,815

NIXON PEABODY LLP
401 9th Street, N.W.
Suite 900
Washington, D.C. 20004-2128

(202) 585-8000

Date: January 30, 2008